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SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Division of Environmental Health, 11 SHS
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION		>> CAUTION: LPI APPROVAL REQUIRED <<	
City, Town, or Plantation	LAMOINE	Town/City	LAMOINE Permit # 1851
Street or Road	PARTRIDGE COVE ROAD	Date Permit Issued	8.7.17 Fee \$265 Double Fee Charged ()
Subdivision, Lot #		Local Plumbing Inspector Signature	L.P.I. # 1040
OWNER/APPLICANT INFORMATION			
Name (last, first, MI)	STOLL, JOSH	<input type="checkbox"/> Owner <input type="checkbox"/> Town <input checked="" type="checkbox"/> State	
Mailing Address of	516 PARTRIDGE COVE ROAD	The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with the application and the Maine Subsurface Wastewater Disposal Rules.	
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	LAMOINE, ME. 04605		
Daytime Tel. #	(207) 460-5749	Municipal Tax Map # 5	Lot # 32
OWNER OR APPLICANT STATEMENT		CAUTION: INSPECTION REQUIRED	
I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a permit.		I have inspected the installation authorized above and found it to be in compliance with Subsurface Wastewater Disposal Rules Application.	
Signature of Owner or Applicant		(1st Date Approved)	
Date		Local Plumbing Inspector Signature	
		(2nd Date Approved)	

PERMIT INFORMATION		
TYPE OF APPLICATION	THIS APPLICATION REQUIRES	DISPOSAL SYSTEM COMPONENT(S)
<input checked="" type="checkbox"/> 1. First Time System <input type="checkbox"/> 2. Replacement System Type Replaced: _____ Year Installed: _____ <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. Minor Expansion <input type="checkbox"/> b. Major Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	<input checked="" type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit	<input checked="" type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous components: _____
SIZE OF PROPERTY	DISPOSAL SYSTEM TO SERVE	TYPE OF WATER SUPPLY
_____ sq. ft. 4 1/2 acres	<input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: 2 <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: (SPECIFY) _____	TO BE <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____
SHORELAND ZONING	Current Use: <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input checked="" type="checkbox"/> Undeveloped	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK	DISPOSAL FIELD TYPE & SIZE	GARBAGE DISPOSAL UNIT	DESIGN FLOW
<input checked="" type="checkbox"/> 1. Concrete <input type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY 1000 gallons	<input checked="" type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input type="checkbox"/> 3. Proprietary Device _____ <input type="checkbox"/> a. Cluster Array <input type="checkbox"/> c. Linear <input type="checkbox"/> b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE 600 sq. ft. lin. ft.	<input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. Multi-compartment Tank <input type="checkbox"/> b. Tanks in Series <input type="checkbox"/> c. Increase in Tank Capacity <input type="checkbox"/> d. Filter on Tank Outlet	180 gallons per day BASED ON <input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities
SOIL DATA & DESIGN CLASS	DISPOSAL FIELD SIZING	EFFLUENT/EJECTOR PUMP	
PROFILE CONDITION 3 / C at Observation Hole # 1 Depth 20" OF MOST LIMITING SOIL FACTOR	<input type="checkbox"/> 1. Medium -- 2.6 sq. ft./gpd <input checked="" type="checkbox"/> 2. Medium-Large -- 3.3 sq. ft./gpd <input type="checkbox"/> 3. Large -- 4.1 sq. ft./gpd <input type="checkbox"/> 4. Extra Large -- 5.0 sq. ft./gpd	<input checked="" type="checkbox"/> 1. Not Required <input type="checkbox"/> 2. May be Required <input type="checkbox"/> 3. Required Specify only for engineered systems DOSE: _____ gallons	<input type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER METER DATA LATITUDE AND LONGITUDE at Center of Disposal Area Lat. 44° 28' 28" N Lon. 68° 17' 04" W if g.p.s., state margin of error 30'

SITE EVALUATOR STATEMENT

I certify that on 1-25-17 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

Site Evaluator Signature: WILLIAM A. LaBELLE, JR.
SE#: 319
(207) 537-5900
Date: 2-7-17
labelleseptec@rivah.net

Site Evaluator Name Printed: WILLIAM A. LaBELLE, JR.
Telephone Number: (207) 537-5900
E-mail Address: labelleseptec@rivah.net

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

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Town, City, Plantation
LANDINE

Street, Road, Subdivision
PARTRIDGE COVE ROAD

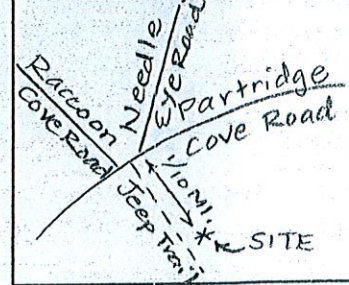
Owner or Applicant Name
JOSH STOLL

SITE PLAN

Scale 1" = 40 Ft.

(SEE ATTACHED SITE PLAN)

SITE LOCATION PLAN
(Attach map from Maine Atlas
for First Time System Variance)



SOIL PROFILE DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above or on pg. 2A)

Observation Hole #1 ☒ Test Pit ☐ Boring
4 " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
SANDY		DARK YELLOWISH BROWN (10YR3/4)	
STONY			N.E.
GRAVELLY	FRIABLE	DARK YELLOWISH	
LOAM		BROWN (10YR4/6)	POSSIBLE FEW FAINT
	FIRM		

Soil Profile 3 Classification C Slope 5 1/2% Limiting Factor 20" Depth 20"
☒ Ground Water
☐ Restrictive Layer
☐ Bedrock
☐ Pit Depth

Observation Hole #2 ☒ Test Pit ☐ Boring
2 " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
SANDY		DARK YELLOWISH BROWN (10YR3/4)	
STONY	FRIABLE		N.E.
GRAVELLY		DARK YELLOWISH	
LOAM	FIRM IN PLACE	BROWN (10YR4/6)	

Soil Profile 3 Classification C Slope 5 1/2% Limiting Factor 20" Depth 20"
☐ Ground Water
☐ Restrictive Layer
☐ Bedrock
☐ Pit Depth

W. C. L. D.
Site Evaluator's Signature

319
S. E. #

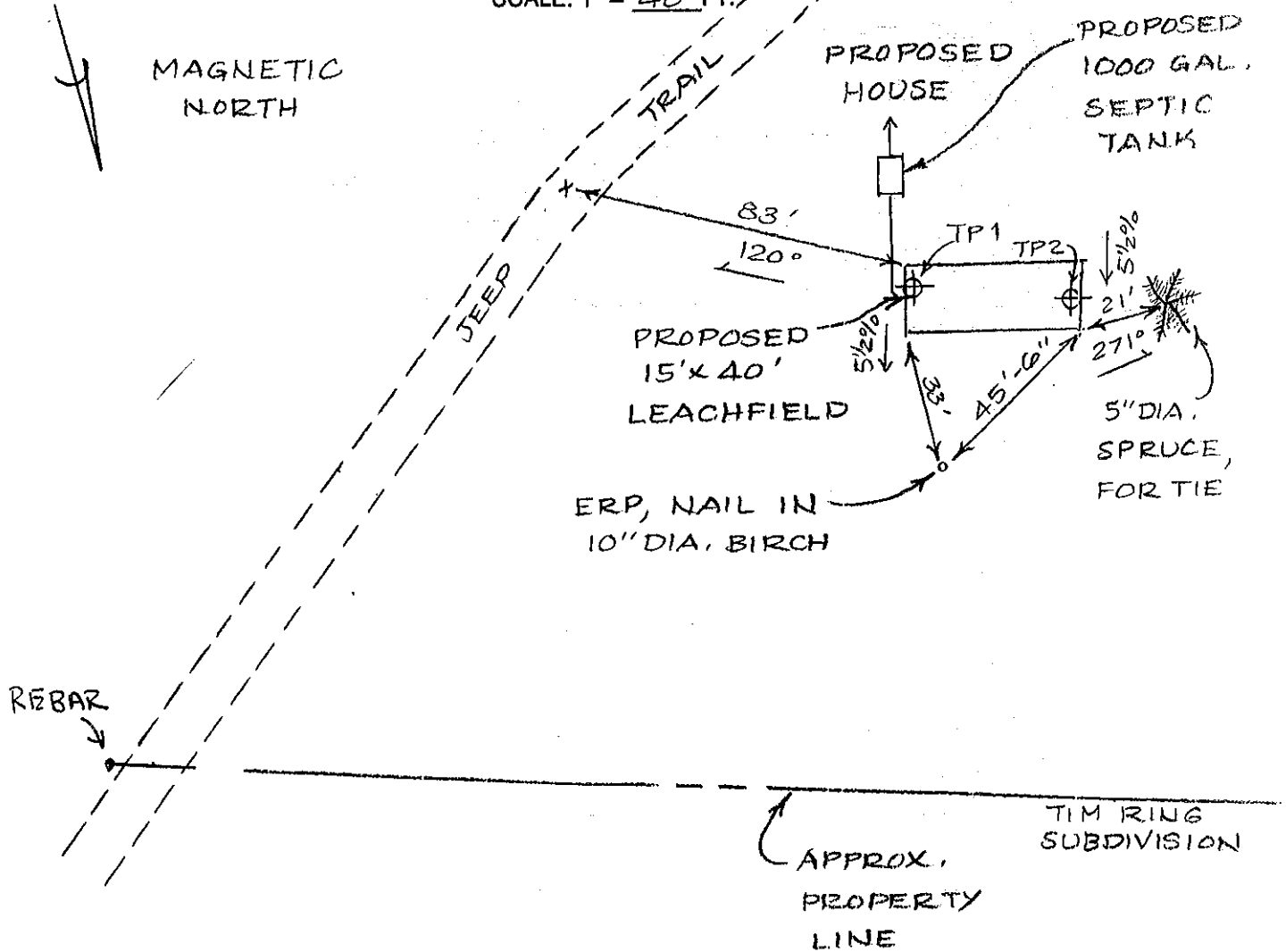
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Date

Page 2 of 3
HHE-200 Rev. 08/2015

Town, City, Plantation LAMOINE	Street, Road, Subdivision PARTRIDGE COVE ROAD	Owner or Applicant Name JOSH STOLL
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SITE PLAN:

SCALE: 1" = 40 FT.



W. C. de N.
Site Evaluator's Signature

319
S.E. #

2-7-17
Date

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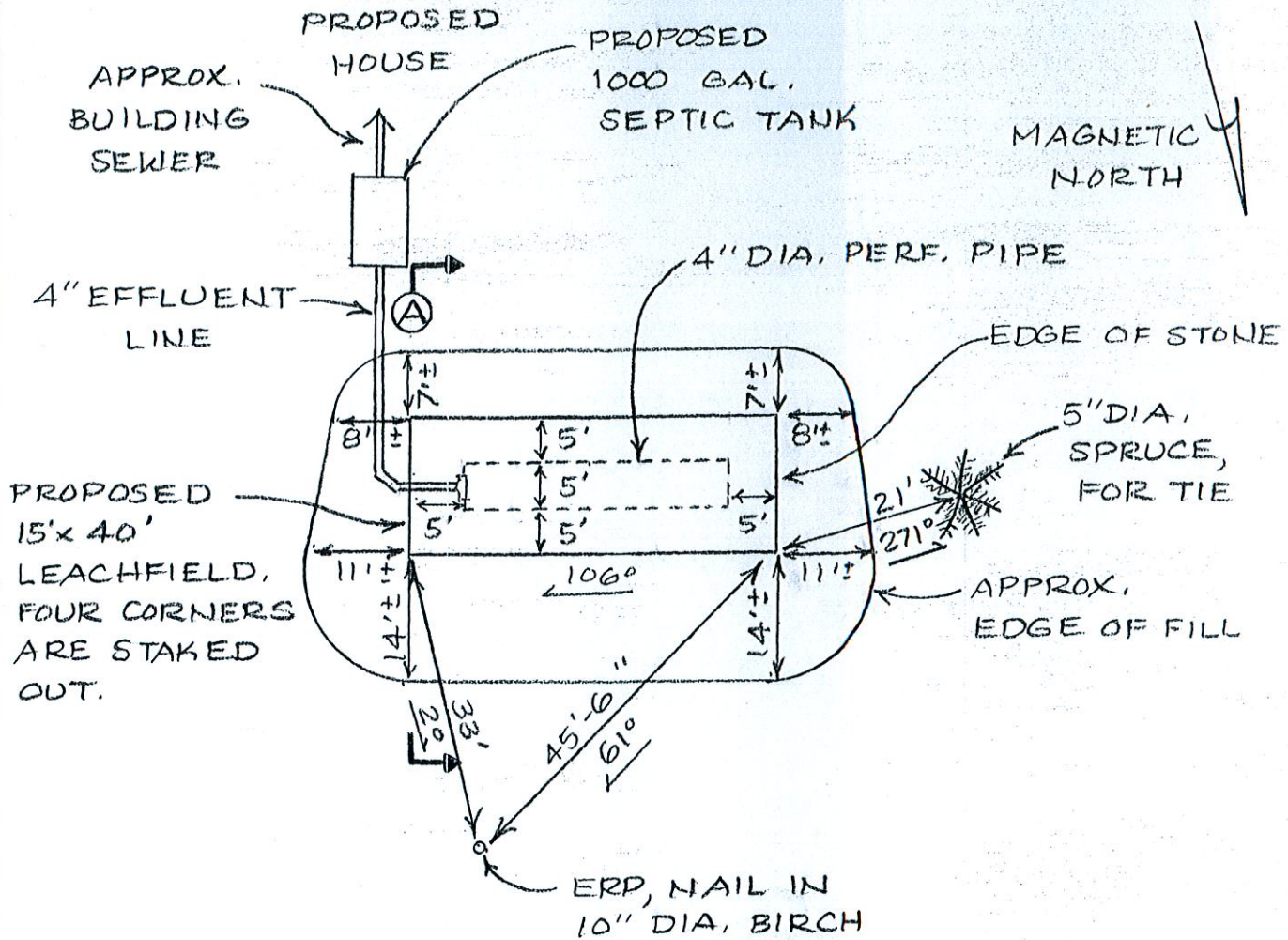
Town, City, Plantation
LAMOINE

Street, Road, Subdivision
PARTRIDGE COVE ROAD

Owner or Applicant Name
JOSH STOLL

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20 FT.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		SYSTEM:	PRIVY:	ELEVATION REFERENCE POINT	
Depth of Backfill (Upslope)	15"	Finished Grade Elevation	CROWN	-34"		Location & Description	NAIL 79"
Depth of Backfill (Downslope)	25"	Top of Distribution Pipe or Proprietary Device		-49"	N/A	ABOVE GROUND IN 10" DIA.	BIRCH.
Depths @ cross-section shown below or on X-sec. detail.		Bottom of Disposal Field		-60"		Reference Elevation is:	0"

DISPOSAL AREA CROSS SECTION (SEE ATTACHED CROSS SECTION)

NOTES:

1. Tank(s) must be 8' minimum from building.
2. Grade surrounding area to divert surface water away from system.
3. Well to be 51' minimum from septic tank(s) and 100' minimum from disposal field.
4. All work done adjacent to wetlands and water bodies must be done in compliance with section 12 of the Subsurface Wastewater Disposal Rules. Erosion and sediment control measures must be in accordance with the March 2003 edition of the Maine DEP Handbook "Maine Erosion and Sediment Control BMPs" (DEPW0588).
5. Install septic tank(s) risers 18" in diameter "minimum" to within 6" of finished grade on inlet, cleanout and outlet covers (recommend extending risers to finish grade).
6. Full basement below grade foundation, frost wall or columns must be 20' minimum from edge of disposal field and slab on grade must be 15' minimum from edge of disposal field.

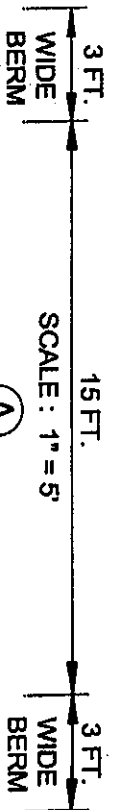
W.C. 2.9
Site Evaluator's Signature

319
S.E. #

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Page 3 of 3
HHE-200 Rev. 08/2015

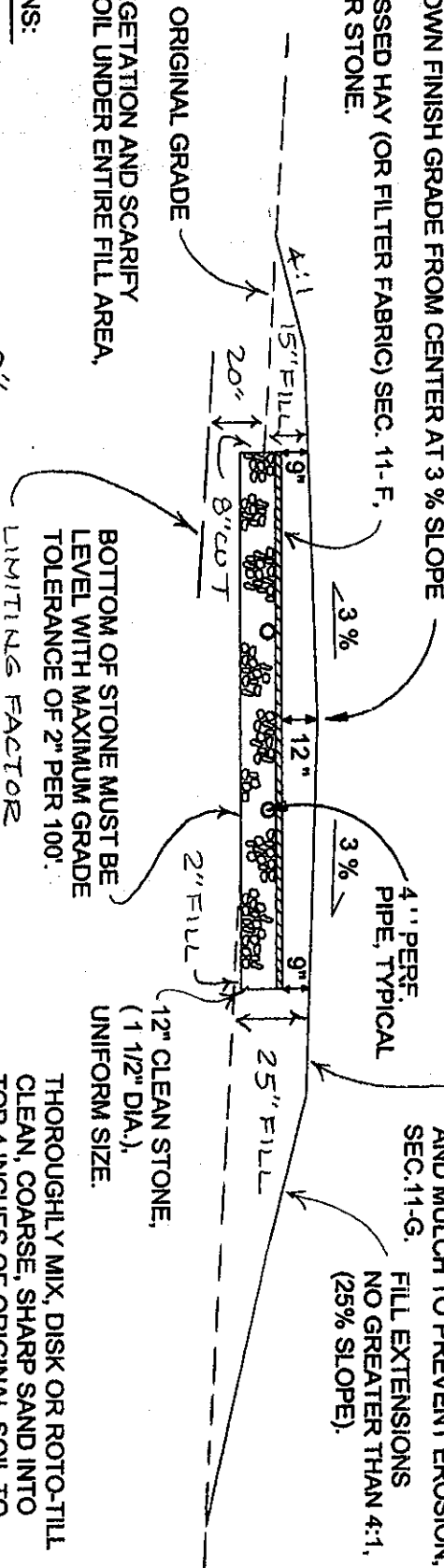
DISPOSAL BED CROSS SECTION



FILL MATERIAL SHALL BE 8"-12" THICK OVER STONE AND SHALL BE GRAVELLY COARSE SAND TO THE STANDARDS IN SEC. 11-E IN THE SUBSURFACE RULES.

CROWN FINISH GRADE FROM CENTER AT 3% SLOPE

2" COMPRESSED HAY (OR FILTER FABRIC) SEC. 11-F, PLACED OVER STONE.



REMOVE VEGETATION AND SCARIFY ORIGINAL SOIL UNDER ENTIRE FILL AREA, SEC. 11-B.

ELEVATIONS:

ELEV. REF. PT. (ERP): 0"

FINISHED GRADE: -34" CROWN

TOP OF DISTRIBUTION PIPE: -49"

BOTTOM OF STONE: -60"

OWNER: JOSH STOLL

LOCATION: LAMOINE

NOTE:

SYSTEM MUST BE INSTALLED ACCORDING TO THE RULES AND PRACTICES SET FORTH IN THE MOST CURRENT VERSION OF THE STATE OF MAINE SUBSURFACE WASTEWATER DISPOSAL RULES. INSTALLATION CONTRATOR MUST BE FAMILIAR WITH SAID RULES AND CONSTRUCT SYSTEM IN FULL COMPLIANCE WITH SECTION 11 OF SAID RULES.

WILLIAM A. LABELLE, JR.

S.E.# 319

DATE 2-7-17